



LOFT NAME: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**\$1500 ONE TIME FRANCHISE FEE**

*Only 200 Franchises To Be Sold*

**\$500 SUSTAINING FEE (COLLECTED ANNUALLY)**

*No more than two franchises to be owned by one person*

**YOU OWN THE OWN FRANCHISE TO DO WITH AS YOU PLEASE!**

**(You can OWN it, LEASE it or SELL it.)**

By owning the Franchise you have to fill the spot every year or you lose your franchise.

YOU MAY NOT PARTICIPATE IN THIS RACE WITHOUT OWNING A FRANCHISE.

Number of Franchises Purchased: \_\_\_\_\_ Total: \_\_\_\_\_

Franchise1 Name: \_\_\_\_\_

Franchise 2 Name (Optional): \_\_\_\_\_

**Make Checks Payable to:  
Flying D or Paul Daniel  
Mail to:  
693 FM 2127 Chico TX 76431**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
CHECK#

\_\_\_\_\_  
DATE

*\*By Signing This Form, I acknowledge and agree to terms listed under Rules & Regulations.*